| DATENT | APPLICA | ATION FEE | <b>DETERMINATION</b> | RECORD |
|--------|---------|-----------|----------------------|--------|
| PAIENI | AFFLICA | ALION FEE | DE I CHIMINALION     | RECOND |

Effective October 1, 2001

| Application | or | Docket | Numbe | ľ |
|-------------|----|--------|-------|---|
|-------------|----|--------|-------|---|

04590-000708

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                    |                      | SMALL ENTITY TYPE               |                  | OTHER THAN OR SMALL ENTITY |                     |                        |           |                     |                        |
|--|--|---|--------------------|----------------------|---------------------------------|------------------|----------------------------|---------------------|------------------------|-----------|---------------------|------------------------|
| TOTAL CLAIMS   |  | 17  |                    |                      |                                 |                  | RATE                       | FEE                 | ĺ                      | RATE      | FEE                 |                        |
| FOR  |  | NUMBER FILED                              |                    | NUMBER EXTRA         |                                 |                  | BASIC FEE                  | 370.00              | OR                     | BASIC FEE | 740.00              |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | 月 minus 20=        |                      | * 1                             |                  |                            | X\$ 9=              |                        | OR        | X\$18=              |                        |
| IND  | EPENDENT CL  | AIMS                                      | <b>℧ minus 3 =</b> |                      | * <i> </i>                      |                  |                            | X42=                |                        | OR        | X84=                | 785                    |
| MU   | LTIPLE DEPEN   | DENT CLAIM PI                             | RESENT             |                      |                                 | +140=            |                            | OR                  | +280=                  |           |                     |                        |
| * If   | the difference   | in column 1 is                            | less than ze       | ro, ente             | r "0" in c                      | olumn 2          | ı                          | TOTAL               |                        | OR        | TOTAL               | 824                    |
|  | C  | LAIMS AS A                                | MENDED             | - PAR                | T II                            |                  |                            | 10.712              |                        | 10        | OTHER               | 1                      |
|  | 0  | (Column 1)                                | MILIADED           |                      | mn 2)                           | (Column 3)       |                            | SMALL E             | ENTITY                 | OR        | SMALL               | u                      |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGH<br>NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |                            | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
| NDM  | Total  | *   | Minus              | **                   |                                 | =                |                            | X\$ 9=              |                        | OR        | X\$18=              |                        |
| AME  | Independent  | *   | Minus              | ***                  |                                 | =                |                            | X42=                |                        | OR        | X84=                |                        |
|  | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEI        | PENDEN               | T CLAIM                         |                  | J                          | +140=.              |                        | OR        | +280=               |                        |
|  |  |   |                    |                      |                                 |                  |                            | TOTAL               |                        | OR        | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                    | (Colu                | ımn 2)                          | (Column 3)       |                            | ADDIT. FEE          |                        |           | ADDII. I EE         |                        |
|  | A CONTRACTOR MANAGEMENT (AND AND AND AND AND AND AND AND AND AND   | CLAIMS                                    |                    | HIG                  | HEST                            |                  | ו ר                        |                     | ADDI-                  |           |                     | ADDI-                  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                    | PREV                 | MBER<br>NOUSLY<br>D FOR         | PRESENT<br>EXTRA |                            | RATE                | TIONAL<br>FEE          |           | RATE                | TIÒNAL<br>FEE          |
| ₩Q.  | Total  | *   | Minus              | **                   |                                 | =                |                            | X\$ 9=              |                        | OR        | X\$18=              |                        |
| ME   | Independent  | *   | Minus              | ***                  |                                 | =                | ] ]                        | X42=                |                        | OR        | X84=                | i i                    |
| <u> </u>   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEI        | PENDEN               | T CLAIM                         |                  |                            |                     |                        | Un        |                     |                        |
|  |  |   |                    |                      |                                 |                  |                            | +140=               |                        | OR        |                     |                        |
|  |  |   |                    |                      | · .                             | ·.               |                            | TOTAL<br>ADDIT. FEE |                        | OR        | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                    | (Colu                | ımn 2)_                         | (Column 3)       |                            |                     |                        |           |                     |                        |
| ENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIG<br>NUI<br>PREV   | HEST<br>MBER<br>TOUSLY<br>D FOR | PRESENT<br>EXTRA |                            | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT C  | Total  | *   | Minus              | **                   |                                 | =                |                            | X\$ 9=              |                        | OR        | X\$18=              |                        |
|  | Independent  | *   | Minus              | ***                  |                                 | <u> </u>         |                            | X42=                |                        | OR        | X84=                |                        |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                    |                      | J                               |                  |                            | 1                   | -                      |           |                     |                        |
|  | 15 st. a. andra, in . a. l.  | 4 is less than t                          |                    |                      | ito "0" in o                    | aluma 2          |                            | +140=               |                        | OR        | +280=               | <u></u>                |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE |   |                    |                      |                                 |                  |                            |                     |                        |           |                     |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                    |                      |                                 |                  |                            |                     |                        |           |                     |                        |